

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>MD</i>	<i>579</i>	<i>12/8</i>
FORMALITY REVIEW	<i>MD</i>	<i>579</i>	<i>3/30/01</i>
RESPONSE FORMALITY REVIEW	<i>Rm</i>	<i>781</i>	<i>05-21-01</i>

INDEX OF CLAIMS

✓ ..... Rejected  
 0 ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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Claim	Date
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Claim	Date
Final	Original
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Best Available Copy

If more than 150 claims or 10 actions  
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